

04/03/01

Jc839 U.S. PTO

04-04-01

RE/A

PTO/SB/50 (4/98)

Approved for use through 9/30/2000. OMB 0651-0033

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REISSUE PATENT APPLICATION TRANSMITTAL

09/824965

04/03/01

Address to: Assistant Commissioner of Patents Box Patent Application Washington, DC 20231	Attorney Docket No.	12967-002001
	First Named Inventor	Tomohiro Kawase et al
	Original Patent Number	6,007,622
	Original Patent Issue Date	December 28, 1999
	Express Mail Label No.	EH956371007

APPLICATION FOR REISSUE OF:
(check applicable box)☒ Utility Patent☐ Design Patent☐ Plant Patent

APPLICATION ELEMENTS

1. ☐ * Fee Transmittal Form (PTO/SB/56)
(Submit an original and a duplicate for fee processing)
2. ☐ Specification and Claims (amended, if appropriate)
3. ☐ Drawing(s) (Proposed amendments, if appropriate)
4. ☒ Reissue Oath / Declaration (original or copy)
5. Original U.S. Patent
☒ Offer to surrender Original Patent (37 C.F.R. § 1.178)
(PTO/SB/53 or PTO/SB/54)
or
☐ Ribboned Original Patent Grant
☐ Affidavit / Declaration of Loss (PTO/SB/55)

6. Original U.S. Patent currently assigned?
☒ Yes ☐ No
(If Yes, check applicable box(es))
☐ Written Consent of all Assignees (PTO/SB/53 or 54)
☐ 37 C.F.R. § 3.73(b) Statement ☐ Power of Attorney

ACCOMPANYING APPLICATION PARTS

7. ☒ Foreign Priority Claim (35 U.S.C. 119)
(if applicable)
8. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☒ Copies of IDS Citations
9. ☐ English Translation of Reissue Oath/Declaration
(if applicable)
10. ☐ * Small Entity Statement(s)
(PTO/SB/09-12) ☐ Statement filed in prior application,
status still proper and desired
11. ☐ Preliminary Amendment
12. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
13. ☐ Other:

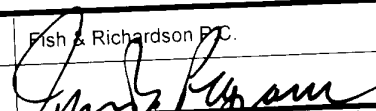
* Note for items 1&10: IN ORDER TO BE ENTITLED TO PAY
SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS
REQUIRED (37 C.F.R. § 1.27), except if one filed in a prior
application is relied upon (37 C.F.R. § 1.28)

14. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code LabelOr ☐ Correspondence address
below


(Insert Customer No. Or Attach bar code label here)

Name	John B. Pegram				
	Fish & Richardson P.C.				
Address	45 Rockefeller Plaza, Suite 2800 New York, NY 10111				
City	New York	State	NY	Zip Code	10111
Country	U.S.A.	Telephone	(212) 765-5070	Fax	(212) 258-2291

NAME (Print/Type)	Fish & Richardson P.C.	Registration No. (Attorney/Agent)	25,198
Signature			Date 4/3/2001

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Express Mail No. EH956371007US

REISSUE APPLICATION FEE TRANSMITTAL FORM						DOCKET NUMBER (Optional) 12967-002001	
Claims as Filed – Part 1							
Claims in Patent	For	Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity	
				Rate	Fee	Rate	Fee
(A) 22	Total Claims (37 CFR 1.16(j))	(B) 183 (Mult. Dep)	161	x \$	=	x \$18 =	2,898.00
(C) 1	Independent Claims (37 CFR 1.16(i))	(D) 3	2	x \$	=	or x \$80 =	270.00 160.00
Basic Fee (37 CFR 1.16(h))					\$		\$ 710.00
Total Filing Fee					\$	OR	\$ 4,038.00
Claims as Amended – Part 2							
	(1) Claims Remaining After Amendment	(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
				Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	MINUS	**	* =	x \$	=	or x \$	=
Independent Claims (37 CFR 1.16(i))	MINUS	*****	=	x \$	=	x \$	=
Total Additional Fee					\$	OR	\$
<p>* If the entry in (D) is less than the entry in (C), write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space</p> <p>*** After any cancellation of claims</p> <p>**** If "A" is greater than 20, use (B-A); If "A" is 20 or less, use (B-20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (c).</p> <p><input type="checkbox"/> Please Charge Deposit Account No. _____ in the amount of _____ A Duplicate Copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u>06-1050</u> A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ <u>4,038.</u> to Cover the filing/additional fee is enclosed.</p>							
April 3, 2001 Date		 Signature of Applicant, Attorney or Agent of Record					
		John B. Pegram Typed or Printed Name					

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